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Sector B 110
ETLI.P-002-US
PATENT APPLICATION

1623
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Jaffe
Serial No.: 09/086,138
Filed: May 28, 1998
For: DETERMINATION OF CYTOTOXIC SUBSTANCES IN WHOLE EFFLUENT SAMPLES

SUPPLEMENTAL RESPONSE TO NOTICE TO FILE MISSING PARTS

Hon. Commissioner of Patent and Trademarks

Washington, D.C. 20231

Sir:

Applicant filed a response to the Notice to File Missing Parts on December 8, 1998, with the signed declaration and small entity form, and requested a three month extension of time. A four month extension was actually required. Applicant hereby requests an additional month extension of time. Enclosed is a check for \$245, which is the difference between the three month extension fee and the four month extension fee. In the event additional fees are deemed payable, the Commissioner is authorized to charge such fees to Deposit Account No. 15-0610.

Respectfully submitted,

Nancy J. Parsons
PTO Reg. No. 40,364
Patent Agent
(970) 668-2050

GROUP 160

99 FEB 12 AM 11:52

Enclosure

I hereby certify that this paper and the attachments named herein are being deposited with the United States Postal Service as first class mail in an envelope addressed to Commissioner of Patents and Trademarks, Washington, D.C. 20231 on December 14, 1998.

December 14, 1998
Date of Signature

Nancy J. Parsons, PTO # 40,364



Please type a plus sign (+) inside this box →

PTO/SB/21 (12-97)
Approved for use through 9/30/00. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

4

Application Number

09/086,138

Filing Date

05/28/98

First Named Inventor

Jaffe

Group Art Unit

1623

Examiner Name

ETLI.P002US

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

99 FEB 12 AM 1:52
GROUP 180

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

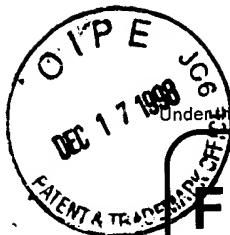
Firm or Individual name	Nancy J. Parsons	PTO Reg. No. 40,364
Signature		
Date	December 14, 1998	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Typed or printed name	Nancy J. Parsons		
Signature		Date	12/14/98

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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PTO/SB/17 (2/98)

Approved for use through 9/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEETRANSMITTAL

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$)

245

Complete if Known

Application Number	09/086,138
Filing Date	05/28/98
First Named Inventor	Jaffe
Examiner Name	
Group / Art Unit	1623
Attorney Docket No.	ETLI.P002US

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account **15-0610**
Number
Deposit Account Name **Oppedahl & Larson**

Charge Any Additional Fee Required Under 37 C.F.R. §§ 1.16 and 1.17 Charge the Issue Fee Set in 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 790	201 395	Utility filing fee	
106 330	206 165	Design filing fee	
107 540	207 270	Plant filing fee	
108 790	208 395	Reissue filing fee	
114 150	214 75	Provisional filing fee	
SUBTOTAL (1) (\$)			

2. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	<input type="text"/> -20** = <input type="text"/>	<input type="text"/> X <input type="text"/> = <input type="text"/>	
Independent Claims	<input type="text"/> - 3** = <input type="text"/>	<input type="text"/> X <input type="text"/> = <input type="text"/>	
Multiple Dependent	<input type="text"/>	<input type="text"/> = <input type="text"/>	

**or number previously paid, if greater; For Reissues, see below

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
103 22	203 11	Claims in excess of 20
102 82	202 41	Independent claims in excess of 3
104 270	204 135	Multiple dependent claim, if not paid
109 82	209 41	** Reissue independent claims over original patent
110 22	210 11	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)		

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
139 130	139 130	Non-English specification	
147 2,520	147 2,520	For filing a request for reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
116 400	216 200	Extension for reply within second month	
117 950	217 475	Extension for reply within third month	
118 1,510	218 755	Extension for reply within fourth month	
128 2,060	228 1,030	Extension for reply within fifth month	
119 310	219 155	Notice of Appeal	
120 310	220 155	Filing a brief in support of an appeal	
121 270	221 135	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,320	241 660	Petition to revive - unintentional	
142 1,320	242 660	Utility issue fee (or reissue)	
143 450	243 225	Design issue fee	
144 670	244 335	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Petitions related to provisional applications	
126 240	126 240	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
146 790	246 395	Filing a submission after final rejection (37 CFR 1.129(a))	
149 790	249 395	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify) diff btn 3 and 4 mo ext			245
Other fee (specify) _____			
SUBTOTAL (3) (\$)			245
* Reduced by Basic Filing Fee Paid			

SUBMITTED BY

Complete (if applicable)

Typed or Printed Name

Nancy J. Parsons

Reg. Number

40,364

Signature

Nancy J. Parsons

Date

12/14/98

Deposit Account

User ID

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.